



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6782

|  |   |                                    |   |  |
|--|---|------------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/696,444   | <b>FILING OR 371(c) DATE</b><br>10/29/2003<br><b>RULE</b>   | <b>CLASS</b><br>345                | <b>GROUP ART UNIT</b><br>2629   | <b>ATTORNEY DOCKET NO.</b><br>450117-04804 |
| <b>APPLICANTS</b><br>Georg Michelitsch, Stuttgart, GERMANY;<br>Jason Williams, Stuttgart, GERMANY;   |   |                                    |   |  |
| <b>** CONTINUING DATA *****</b><br><div style="text-align: right;">None ~ S.M.</div>   |   |                                    |   |  |
| <b>** FOREIGN APPLICATIONS *****</b><br>EUROPEAN PATENT OFFICE (EPO) 02 024 276.4 10/31/2002    Verified ~ S.M.  |   |                                    |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 01/29/2004</b>   |   |                                    |   |  |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met<br>Verified and Acknowledged <i>S.M.</i> Allowance    S.M. Initials<br>Examiner's Signature |   | <b>STATE OR COUNTRY</b><br>GERMANY | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>15                  |
|  |   |                                    |   | <b>INDEPENDENT CLAIMS</b><br>1             |
| <b>ADDRESS</b><br>WILLIAM S. FROMMER, Esq.<br>c/o FROMMER LAWRENCE & HAUG LLP<br>745 Fifth Avenue<br>New York, NY10151   |   |                                    |   |  |
| <b>TITLE</b><br>Method for operating a haptic interface unit   |   |                                    |   |  |
| <b>FILING FEE RECEIVED</b><br>770  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |